

In the Claims

Please cancel Claims 1-21 and add new Claims 22-51 in its entirety as follows (the changes in these claims from the previous version to the rewritten version are shown in Appendix A, with underline for added matter).

22. (New) A system for generating tasks to be performed in an insurance organization, the system comprising:

an insurance transaction database for storing information related to an insurance transaction;

a task library database for storing rules for determining tasks to be completed upon an occurrence of an event;

a client component in communication with the insurance transaction database configured for providing information relating to the insurance transaction; and

a server component in communication with the client component, the transaction database and the task library database, the server component including an event processor, a task engine and a task assistant;

wherein the event processor is triggered by application events associated with a change in the information, and sends an event trigger to the task engine; wherein in response to the event trigger, the task engine identifies rules in the task library database associated with the event and applies the information to the identified rules to determine the tasks to be completed, and populates on a task assistant the determined tasks to be completed, wherein the task assistant transmits the determined tasks to the client component.

23. (New) The system of Claim 22, further comprising a task library administrator interface for adding or editing rules and tasks in the task library.

24. (New) The system of Claim 23, wherein the task library includes a list of all standardized tasks.

Sub 25 25. (New) The system of Claim 24, wherein the tasks associated with the information relating to the insurance transaction include predetermined due dates.

26. (New) The system of claim 25, wherein the task assistant generates a historical record to document completion of the tasks.

Sub C1 27. (New). The system of Claim 22, wherein the characteristics are regulatory compliance requirements, account servicing commitments and best practices for handling all types of claims.

Sub B 28. (New) The system of Claim 22, wherein the insurance transaction database is a claims folder.

29. (New) The system of Claim 28, wherein the claim folder contains the information related to the insurance transaction decomposed into a plurality of levels from the group comprising a policy level, a claim level, a participant level and a line level, wherein the plurality of levels reflects a policy, the information related to the insurance transaction, claimants and an insured person in a structured format.

Sub 30 30. (New) The system of Claim 29, wherein the information related to the insurance transaction is a claim under an insurance policy.

31. (New) An automated method for generating tasks to be performed in an insurance organization comprising:

monitoring a transaction database containing information relating to an insurance transaction;

Sub 32 in response to certain changes in the information, identifying an event associated with the change;

in response to the identified event, retrieving rules stored in a rules database, said retrieved rules being associated with said identified event;

determining a task to be completed based on said retrieved rules and on the information;

assigning said task to an employee or group of employees for completion;
displaying information associated with said task on a user interface;
capturing data entered through the user interface and storing said data in said transaction database; and
identifying said task as completed.

32. (New) The method of claim 31, further comprising recording the completion of the task in said transaction database.

33. (New) The method of claim 31, further comprising
inputting at least one of a new rule and an edited rule into a library rules interface; and
storing said at least one new rule and edited rule in said rules database.

34. (New) The method of claim 31, wherein said insurance transaction is a claim for compensation under an insurance policy, and said information relates to the claim.

35. (New) The method of claim 31, further comprising
collecting onto a task list assigned tasks that have not been completed;
displaying the task list on the user interface; and
in response to a selection by the user, adding, editing, or deleting a task from the task list.

36. (New) An automated method for generating tasks to be performed in an insurance organization, the method comprising:

transmitting information related to an insurance transaction;
determining characteristics of the information related to the insurance transaction;
applying the characteristics of the information related to the insurance transaction to rules to determine a task to be completed;

transmitting the determined task to a task assistant, wherein the task assistant displays the determined task;

allowing an authorized user to edit and perform the determined task and to update the information related to the insurance transaction in accordance with the determined task;

storing the updated information related to the insurance transaction; and generating a historical record of the completed task.

37. (New) The method of Claim 36, wherein the characteristics are regulatory compliance requirements, account servicing commitments and best practices for handling all types of claims.

38. (New) The method of Claim 36, wherein an event processor interacts with a insurance transaction database containing information related to an insurance transaction decomposed into a plurality of levels from the group comprising a policy level, a claim level, a participant level and a line level, wherein the plurality of levels reflects a policy, the information related to the insurance transaction, claimants and an insured person in a structured format.

39. (New) The method of Claim 38, wherein the information related to the insurance transaction is a claim under an insurance policy.

40. (New) The method of Claim 39, wherein the policy level further comprises information related to a covered automobile for automobile claims.

41. (New) The method of Claim 39, wherein the policy level further comprises information related to covered property for property claims.

42. (New) The method of Claim 39, wherein the policy level further comprises information related to covered yacht for marine claims.

43. (New) The method of Claim 38, wherein the claim level further comprises information from the group comprising facts of loss, events and liability.